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annronnale All Miller	correspondence including	ng the Patent, advan	ce orders and notification	oi maintenance tees v	will be mailed to the cu	n 5 should be completed where urrent correspondence address as a separate "FEE ADDRESS" for	
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F. Lindsey Sco Suite B 2329 Coit Road Plano, TX 7507:	10/11/2008 6	HBIZUNE2 0000007	2 10814742 700.00 DP	Ce I hereby certify that the States Postal Service States Postal Service addressed to the Mai transmitted to the USF	rtificate of Mailing or T his Fee(s) Transmittal is with sufficient postage for il Stop ISSUE FEE add PTO (571) 273-2885, on	being deposited with the United or first class mail in an envelope dress above, or being facsimile the date indicated below.	
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APPLICATION NO.	ICATION NO. FILING DATE		FIRST NAMED INVEN	ST NAMED INVENTOR ATTO		NO. CONFIRMATION NO.	
10/814,742	04/01/2004		James E. Mitchell		JMIT-25,712	7195	
PITLE OF INVENTION	: AUTOMATIC AND A	A MANUAL LIFT-U	P VENTILATED GATE F	OR USE WITH AN C	OVERHEAD GARAGE	DOOR	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	JE FEE TOTAL FEE(S)	DUE DATE DUE	
nonprovisional	YES	\$700	\$300	\$0	\$1000	12/08/2006	
EXAMINER ART U		ART UNIT	CLASS-SUBCLASS				
PUROL, I	DAVID M	3634	160-113000			•	
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind	ence address or indication ondence address (or Cha 3/122) attached. ication (or "Fee Address 2 or more recent) attach	ange of Corresponders" Indication form	(1) the names of u or agents OR, alter (2) the name of a s registered attorney 2 registered patent	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Please check the appropr	iate assignce category or	r categories (will not	be printed on the patent):	☐ Individual ☐ C	orporation or other priva	te group entity Government	
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a. Applicant claim	tus (from status indicate s SMALL ENTITY state	us. See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMA	LL ENTITY status. See	37 CFR 1.27(g)(2).	
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Authorized Signature	J. Lind	lseyesc	0 2/	Date	0-03-06		
Typed or printed name	F. LINDSE	y Scott	•	Registration l	No. <u>26,230</u>		
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